Effective Date: 11/19/15

1.0 Administration

1.12 Public Health Disaster/Emergency Planning and Coordination

PURPOSE: Although the WIC Program is not designed to be a disaster assistance program, and therefore is not considered a first line of defense, these WIC policies are designed to allow agencies flexibility in program design and administration to support planning and preparation for continuation of benefits to clients during times of natural or other disasters or public health emergencies. In the event of a disaster or emergency, the State and

local agency will work cooperatively to arrange for minimal disruption of services.

A. POLICY:

1. To the extent possible, local agencies shall continue to provide services to clients during a public health emergency or disaster situation.

- a. Local agencies shall provide for the safety of WIC personnel, clients and equipment.
- b. Records, equipment and supplies shall be secured.
- c. Services shall be restored as soon as possible following such incidents.
- d. Clients shall be notified of disruption or relocation of services.

2. Disaster Plan

- a. The local agency shall develop a disaster plan that will include:
 - i. A copy of the parent agency's disaster preparedness plan, if applicable.
 - ii. Local governmental/community agency emergency contact information.
 - iii. State and local WIC staff contact information.
 - iv. A plan for notifying clients of service disruption, relocation and availability of WIC services.
- Local agencies may use WIC funds to provide essential equipment to administer the WIC Program in an emergency, e.g. cell phone, air card, etc.
- c. The local agency shall review with staff on an annual basis the contingency plans for delivery of services in a disaster.
- d. In the event that WIC services cannot be provided in a timely manner due to a public health emergency/disaster, the local agency shall contact the State WIC Program for allowable options. The local agency shall provide any available information on the following:
 - i. WIC services that are disrupted

- 1. Clinic operations/building structure (physical damage, availability of electricity and water)
- 2. Temporary facility (if applicable), computer, internet service and food instrument availability
- 3. Availability of staff
- 4. Report of availability of grocery stores and food
- ii. The potential number of clients who are affected
- iii. Damaged/destroyed WIC records, equipment and/or property
- iv. The extent of time the local agency will be inoperable
- v. Recovery/restoration plan
- e. The State agency shall make decisions related to waiver of policy and procedure requirements upon request of the local agency.
- f. The local agency shall establish communication with the local health department for direction in the event of a disaster/public health emergency.

3. Certification

- Homeless disaster victims seeking WIC services shall be considered at special nutritional risk and certified within 10 days of their request for WIC services.
- b. The income, residency and identity documentation requirements do not apply to individuals for whom documentation is not available. See Policies 2.02 Residency, 2.03 Identity and 2.04 Income Determination to determine whether the client should receive a short certification or sign attestation forms.
- c. Displaced individuals who are temporarily residing with another family shall be considered a separate family.
- d. Hemoglobin measurements may be deferred up to 90 days for clients.
- e. In cases of emergencies/disasters, local agencies may use flexibility in scheduling WIC appointments when required because of staffing shortages or inability of clients to attend the clinic.
 - i. The local agency may extend the certification period for infants and children for 30 days to accommodate difficulty in scheduling clients. (See Policy 2.17 Certification Periods.)
 - ii. Certifications may be completed by CPAs working in other programs (e.g. MIHP home visit).
- f. Persons with a serious illness that may be exacerbated by coming into the WIC clinic may be exempt from the physical presence requirement for certification visits. (See Policy 2.09 Physical Presence.)

4. Food Benefits

- a. Breastmilk shall be promoted as the safest milk for infants and young children during an emergency or disaster situation.
- b. WIC food benefits, including formula, may not be used for purposes other than providing benefits to categorically eligible clients.
- c. Local agencies may replace lost/destroyed benefits on approval of the WIC Coordinator.
- d. If able, local agencies shall immediately replace Michigan WIC Bridge cards that have been lost or destroyed during a disaster.
- e. Local agencies shall be aware of, and refer clients to, emergency feeding locations.
- f. Local agencies may modify infant food packages to include ready-tofeed or powdered infant formulas in instances where water supply or refrigeration is inadequate.
- g. Exempt Infant Formula/WIC-Eligible Medical Foods
 - i. Disaster victims transferring into Michigan WIC clinics with a food instrument (coupon or voucher) that specifies an exempt infant formula or WIC-eligible medical food may be issued benefits for the specified item up to the end date of the coupons/vouchers presented.
 - ii. Disaster victims transferring into Michigan WIC clinics without a food instrument (coupon or voucher), but who can provide the name of the exempt infant formula or WIC-eligible medical food that the individual was receiving before relocating, may be issued a 1-month benefit for that specific item.
 - iii. Persons seeking WIC benefits who were not participants prior to the disaster must obtain medical documentation prior to issuing the exempt infant formula or WIC-eligible medical foods.
- h. In the event of a disaster that results in discontinuation of WIC services or unavailability of food in retail stores, local agencies must refer clients to other emergency food programs such as food banks, emergency feeding sites, Red Cross or other disaster relief agencies.

5. <u>Nutrition Education</u>

- a. Local agencies shall encourage mothers to initiate, continue or resume breastfeeding their infants or young children if possible during emergency or disaster situations. Mothers with formula-fed infants less than one month old and mothers who recently discontinued breastfeeding shall be encouraged to relactate.
- b. Attention should be given to providing nutrition education related to food preparation and safety or special medical needs for high risk clients. Topics may include:
 - i. Limited or no access to safe water supply.
 - ii. Handling and storage of breastmilk or infant formula.

- iii. Keeping food safe during an emergency.
- c. During human pandemics, clients shall be encouraged to use self-directed nutrition education via wichealth.org for secondary nutrition education, if available. (See Policy 5.01 Content of Nutrition Education.) Clients who complete nutrition education via wichealth.org may have benefits loaded without presenting at the clinic.

6. <u>Biological Emergencies/Pandemics</u>

- a. The WIC Coordinator shall follow local health department recommendations for suspension of clinics or other precautions to be taken in WIC clinics.
- b. Staff shall be encouraged to stay home when ill during a human pandemic. In the event that WIC services cannot be maintained due to staff absence, contact the State WIC office for allowable options.
- c. With the approval of the State agency, local WIC resources may be incorporated into the local agency Biological Disaster Response plan.

B. GUIDANCE:

- 1. Local agencies may work with their local health department or other community agencies to participate in preparedness planning.
- 2. Local agencies may work with their local MSU Extension office to provide information on safe food supply and food safety during an emergency or disaster.
- 3. Local agencies are encouraged to maintain a nutrition education lesson plan related to food safety.

4. Disruption in Potable Water Supply

Local agencies may use the Pre-Defined Report feature in MI-WIC to identify clients by zip code who may be affected by a disaster and may need a modified food package issued temporarily due to a disruption in water supply. If a powder formula package must be modified, local agencies should take into consideration the length of the disaster and the amount of formula needed when modifying the package. Affected clients should be contacted regarding the modified package and provided education about differences in formula preparation and storage for the modified package.

5. Influenza/Human Pandemic

- a. Local agency coordinators may rely on their local health department for guidance on the extent of the pandemic and how to handle the event, i.e., what precautions to take in the clinic or whether clinics will be suspended.
- b. Frequently clean commonly used surfaces, such as door handles, handrails, counters, etc. Commercial disinfectants or bleach solutions should be used. (Mixing ¼ cup bleach with 1 gallon of water makes bleach solution.) Temporarily remove toys from client areas.
- c. Local agencies may post "Cover Your Cough" and "Washing Your Hands" posters in clinic areas.
- d. Local agencies may access the following resources for more information on influenza: www.michigan.gov/flu, www.cdc.gov/flu or http://wicworks.nal.usda.gov/topics-z/flu-resources.

References:

Detailed Policy Guidance for State Cooperators in Disaster Situations , http://www.fns.usda.gov/wic/disasterpolicyguidance.htm, accessed 8/29/13 WIC Policy Memorandum #2007-5 WIC Program Response to a Human Pandemic

Cross-references:

2.02 Residency

2.03 Identity

2.04 Income Determination

2.09 Physical Presence

2.17 Certification Periods

5.01 Content of Nutrition Education